

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

ADDRESS (number and street) ▼

PO Box 150064

☐ Check if different than previously reported. (ACC)

Grand Rapids

MI

49515

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00402800

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☒ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kimberly Buchan

Signature of Treasurer

Kimberly Buchan

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
06 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		25793.85
(b) Cash on Hand at Beginning of Reporting Period.....	31605.78	
(c) Total Receipts (from Line 19)	40185.26	158012.12
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	71791.04	183805.97
7. Total Disbursements (from Line 31)	36930.41	148945.34
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	34860.63	34860.63
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 06 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y
 06 / 30 / 2015
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

10514.00

36281.17

(ii) Unitemized

19630.55

86097.82

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

30144.55

122378.99

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

30144.55

122378.99

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

40.71

133.13

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

10000.00

35500.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

10000.00

35500.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

40185.26

158012.12

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

30185.26

122512.12

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	10000.00	35500.00
(ii) Non-Federal Share.....	10000.00	35500.00
(b) Other Federal Operating Expenditures	8133.62	67809.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	28133.62	138809.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	250.00
24. Independent Expenditures (use Schedule E)	8551.79	8551.79
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	245.00	1334.30
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	245.00	1334.30
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	36930.41	148945.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26930.41	113445.34

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	30144.55	122378.99
34. Total Contribution Refunds (from Line 28(d))	245.00	1334.30
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29899.55	121044.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	18133.62	103309.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	40.71	133.13
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	18092.91	103176.12

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: F3XA

Transaction ID :

All donors with addresses outside of the country are US citizens. This organization is operated by staff (independent contractors) from their homes therefore no office space is rented or utilities required. Telephone and internet services, office equipment, supplies and salaries are the main administrative expenses incurred by this organization. A majority of our work is done through travel and events and over the internet. All expenses have been adequately disclosed.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 81

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Allan Affeldt

Mailing Address 303 E. 2nd Str.

City State Zip Code
Winslow AZ 86047

FEC ID number of contributing federal political committee.

C

Name of Employer
Monastery Hotels Llc

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2015

Transaction ID : SA11AI.132730

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. kathleen andersen

Mailing Address 9526 40th ave ne

City State Zip Code
SEATTLE WA 98115

FEC ID number of contributing federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 16 / 2015

Transaction ID : SA11AI.133070

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Kurt Bateman

Mailing Address 498 Enfield Road

City State Zip Code
Columbus OH 43209-2254

FEC ID number of contributing federal political committee.

C

Name of Employer
Span Ohio

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2015

Transaction ID : SA11AI.132731

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

320.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. William Bianchi

Mailing Address 4141 N. Paulina

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cetrus Belt Teachers Assn.

Occupation

Teacher

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 16 / 2015

Transaction ID : SA11AI.132657

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Phil Brady

Mailing Address 921 Faith Circle E, #14

City

Bradenton

State

FL

Zip Code

34212

FEC ID number of contributing
federal political committee.

C

Name of Employer

Inquiring

Occupation

Inquiring

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11AI.133159

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Amrita Burdick

Mailing Address 4528 Wyoming St.

City

Kansas City

State

MO

Zip Code

64111

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Missouri-Kansas

Occupation

Medical Librarian

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2015

Transaction ID : SA11AI.132696

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

330.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. CA Democratic Conv. Cash donations

Mailing Address 150 W. San Carlos St.

City State Zip Code
San Jose CA 95113

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

06 / 17 / 2015

Transaction ID : SA11Al.133128

Amount of Each Receipt this Period

215.00

Full Name (Last, First, Middle Initial)

B. Miscellaneous Cash donations

Mailing Address PO Box 150064

City State Zip Code
Grand Rapids MI 49515

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1018.00

Date of Receipt

06 / 02 / 2015

Transaction ID : SA11Al.132975

Amount of Each Receipt this Period

275.00

Full Name (Last, First, Middle Initial)

C. Miscellaneous Cash donations

Mailing Address PO Box 150064

City State Zip Code
Grand Rapids MI 49515

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1023.00

Date of Receipt

06 / 02 / 2015

Transaction ID : SA11Al.132986

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

495.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Miscellaneous Cash donations

Mailing Address PO Box 150064

City

Grand Rapids

State

MI

Zip Code

49515

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1123.00

Date of Receipt

06 / 02 / 2015

Transaction ID : SA11AI.132991

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Miscellaneous Cash donations

Mailing Address PO Box 150064

City

Grand Rapids

State

MI

Zip Code

49515

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1236.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.133197

Amount of Each Receipt this Period

113.00

Full Name (Last, First, Middle Initial)

C. Miscellaneous Cash donations

Mailing Address PO Box 150064

City

Grand Rapids

State

MI

Zip Code

49515

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1251.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.133206

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

228.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Miscellaneous Cash donations

Mailing Address PO Box 150064

City State Zip Code
Grand Rapids MI 49515

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1371.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.133214

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. Dorothy Chapman

Mailing Address 2121 Hill Street

City State Zip Code
Santa Monica CA 90405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 07 / 2015

Transaction ID : SA11AI.132449

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Jeffrey L. Cox

Mailing Address 112 S. Dodge St.

City State Zip Code
Iowa City IA 52240

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Iowa

Occupation

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

793.00

Date of Receipt

06 / 13 / 2015

Transaction ID : SA11AI.132611

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

245.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 81

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Vicki Danielson

Mailing Address 521 Nelson Rd.

City

Stanton

State

MI

Zip Code

48888

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 14 / 2015

Transaction ID : SA11Al.133299

Amount of Each Receipt this Period

286.00

Full Name (Last, First, Middle Initial)

B. Allen Davis

Mailing Address 818 E. Pleasant St.

City

Amherst

State

MA

Zip Code

01002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Financial Planner

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 10 / 2015

Transaction ID : SA11Al.132511

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Bobby Dawn Dershem

Mailing Address 1618 Elmhurst St.

City

Chula Vista

State

CA

Zip Code

91913

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 11 / 2015

Transaction ID : SA11Al.132558

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

411.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 13 OF 81
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. ann detweiler

Mailing Address 34989 fry road se

City	State	Zip Code
albany	OR	97322

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
06	/	29	/	2015

Transaction ID : SA11Al.132945

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

B. Peter W. Deutsch

Mailing Address 153 Cherry Lane

City	State	Zip Code
Aliquippa	PA	15001

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
06	/	09	/	2015

Transaction ID : SA11Al.133332

Amount of Each Receipt this Period

3.00

Full Name (Last, First, Middle Initial)

C. Peter W. Deutsch

Mailing Address 153 Cherry Lane

City	State	Zip Code
Aliquippa	PA	15001

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
06	/	10	/	2015

Transaction ID : SA11Al.132514

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ▶

253.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Harvey Fernbach

Mailing Address 8600 Split Oak Circle

City State Zip Code
 Bethesda MD 20817

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 15 / 2015

Transaction ID : SA11AI.132645

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Harvey Fernbach

Mailing Address 8600 Split Oak Circle

City State Zip Code
 Bethesda MD 20817

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 16 / 2015

Transaction ID : SA11AI.132660

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Lisa Franzen

Mailing Address 13 Calle Pinon

City State Zip Code
 Placitas NM 87043

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

851.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 13 / 2015

Transaction ID : SA11AI.132614

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Lisa Franzen

Mailing Address 13 Calle Pinon

City State Zip Code
Placitas NM 87043

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

901.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 15 / 2015

Transaction ID : SA11AI.132647

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Russell Freedman

Mailing Address PO Box 242

City State Zip Code
Lanesborough MA 01237

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SecondLife Books

Bookseller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

863.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 16 / 2015

Transaction ID : SA11AI.133096

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

C. Russell Freedman

Mailing Address PO Box 242

City State Zip Code
Lanesborough MA 01237

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SecondLife Books

Bookseller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 23 / 2015

Transaction ID : SA11AI.133411

Amount of Each Receipt this Period

230.00

SUBTOTAL of Receipts This Page (optional)..... ►

318.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 81
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Fritzie Gaccione

Mailing Address 9801 Collins Ave 10R

City	State	Zip Code
Bal Harbour	FL	33154

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	06	/	2015

Transaction ID : SA11Al.132442

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Shirley Golub

Mailing Address 2916 Frye St.

City	State	Zip Code
Oakland	CA	94602

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Real Estate Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	28	/	2015

Transaction ID : SA11Al.133366

Amount of Each Receipt this Period

133.00

Full Name (Last, First, Middle Initial)

C. Michael Gordy

Mailing Address 4401 E. Blacklidge Dr.

City	State	Zip Code
Tucson	AZ	85712

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	01	/	2015

Transaction ID : SA11Al.132274

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

173.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Sherri Goulet

Mailing Address 3516 Pifer Rd. SE

City	State	Zip Code
Olympia	WA	98501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	8		2	0	1	5		

Transaction ID : SA11AI.132936

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Robert Greenberg

Mailing Address 745 W. Meadowlark Lane

City	State	Zip Code
Corrales	NM	87048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	9		2	0	1	5		

Transaction ID : SA11AI.132947

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Russell Greene

Mailing Address 5011 Noeline Ave.

City	State	Zip Code
Encino	CA	91436

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Cheesecake Factory

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

962.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		0	5		2	0	1	5		

Transaction ID : SA11AI.132381

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ▶

650.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<p>Full Name (Last, First, Middle Initial) A. Pamela S. Gronemeyer</p> <p>Mailing Address 34 Kingsley Way</p> <p>City State Zip Code Glen Carbon IL 62034</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer self Occupation physician</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2015 Transaction ID : SA11AI.132959</p> <p>Amount of Each Receipt this Period 50.00</p>	
<p>Full Name (Last, First, Middle Initial) B. Dr. Van Hamilton</p> <p>Mailing Address 1432 Mountain View Rd</p> <p>City State Zip Code Santa Barbara CA 93109</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 407.82</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 06 / 16 / 2015 Transaction ID : SA11AI.132664</p> <p>Amount of Each Receipt this Period 50.00</p>	
<p>Full Name (Last, First, Middle Initial) C. Robert Heron</p> <p>Mailing Address 10941 Sproul Ave.</p> <p>City State Zip Code Los Angeles CA 90064</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer CR Management Co. Occupation Real Estate Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 400.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 06 / 16 / 2015 Transaction ID : SA11AI.133105</p> <p>Amount of Each Receipt this Period 300.00</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			400.00	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Edwin Homeier

Mailing Address 109 Sun St.

City State Zip Code
Cabery IL 60919

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 24 / 2015

Transaction ID : SA11AI.132859

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Kelley Johnson

Mailing Address 271 North Road
Box 94

City State Zip Code
Hampden MA 01036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 04 / 2015

Transaction ID : SA11AI.133244

Amount of Each Receipt this Period

103.00

Full Name (Last, First, Middle Initial)

C. Kelley Johnson

Mailing Address 271 North Road
Box 94

City State Zip Code
Hampden MA 01036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 05 / 2015

Transaction ID : SA11AI.132389

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

403.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Kelley Johnson

Mailing Address 271 North Road
Box 94

City State Zip Code
Hampden MA 01036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 10 / 2015

Transaction ID : SA11AI.132523

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Kelley Johnson

Mailing Address 271 North Road
Box 94

City State Zip Code
Hampden MA 01036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

564.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 16 / 2015

Transaction ID : SA11AI.133095

Amount of Each Receipt this Period

63.00

Full Name (Last, First, Middle Initial)

C. David Kelley

Mailing Address 5535 Champion Creek Blvd.

City State Zip Code
Medina OH 44256

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Kelley Shulmond & Co.

Pension Evaluator/Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 10 / 2015

Transaction ID : SA11AI.132524

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

213.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Mimi Kennedy

Mailing Address 6535 Langdon Ave

City State Zip Code
Van Nuys CA 91406

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hollygreen Productions

Occupation
Actress

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2015

Transaction ID : SA11Al.133117

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Mimi Kennedy

Mailing Address 16133 Ventura Bl. Suite 520

City State Zip Code
Encino CA 91436

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hollygreen Productions

Occupation
Actress

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 21 / 2015

Transaction ID : SA11Al.132807

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. Sallie Kladnik

Mailing Address 3530 N. Monte Vista Dr.

City State Zip Code
Flagstaff AZ 86004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 20 / 2015

Transaction ID : SA11Al.133342

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Sallie Kladnik

Mailing Address 3530 N. Monte Vista Dr.

City State Zip Code
Flagstaff AZ 86004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.00

Date of Receipt

06 / 29 / 2015

Transaction ID : SA11AI.133439

Amount of Each Receipt this Period

43.00

Full Name (Last, First, Middle Initial)

B. Mark Lacelle-Peterson

Mailing Address 7357 Campus Heights Rd.

City State Zip Code
Houghton NY 14744

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Teacher Ed. Accred. Council

Researcher & Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 26 / 2015

Transaction ID : SA11AI.132901

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Jim Lefebvre

Mailing Address 3041 Quebec Ave. South

City State Zip Code
St. Louis Park MN 55426

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.133187

Amount of Each Receipt this Period

92.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Marc Levin

Mailing Address 320 Franklin Ave.

City State Zip Code
Silver Spring MD 20901

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Sentencing Project

Occupation
Program Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 21 / 2015

Transaction ID : SA11AI.132793

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Darlene Little

Mailing Address 9882 Spruce CT

City State Zip Code
Cypress CA 90630-3880

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cypress College

Occupation
Lecturer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 06 / 2015

Transaction ID : SA11AI.133288

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Jerry Manpearl

Mailing Address 939 San Vicente Blvd.

City State Zip Code
Santa Monica CA 90402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2015

Transaction ID : SA11AI.133122

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

390.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Mary Ellen Marino

Mailing Address 9 Hornor Lane

City
Princeton

State
NJ

Zip Code
08540

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

06 / 04 / 2015

Transaction ID : SA11AI.132333

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Nancy McLure

Mailing Address 9 Bodnar St.

City

Bernardsville

State

NJ

Zip Code

07924

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

06 / 12 / 2015

Transaction ID : SA11AI.132587

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Amos Miers

Mailing Address 11850 MLK ST N APT 1111

City

ST PETERSBURG

State

FL

Zip Code

33716

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Graphic Design

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

06 / 05 / 2015

Transaction ID : SA11AI.132404

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Dan O'Neal

Mailing Address 3731 E. Redfield Rd

City
GilbertState
AZZip Code
85234-3112FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2015

Transaction ID : SA11AI.132828

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Dan O'Neal

Mailing Address 3731 E. Redfield Rd

City
GilbertState
AZZip Code
85234-3112FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11AI.133176

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Denis O'Neal

Mailing Address 431 Valley Oak Drive

City
Morgan HillState
CAZip Code
95037FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	03	/	2015

Transaction ID : SA11AI.132312

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ▶

265.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Eva Putzova

Mailing Address 700 N. Magma Way

City

State

Zip Code

Flagstaff

AZ

86001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northern Arizona University

Occupation

Director, Policy Initiatives

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

06 / 09 / 2015

Transaction ID : SA11AI.133335

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Chuck Reutter

Mailing Address 29066 Bradley Rd.

City

State

Zip Code

Menifee

CA

92586

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 02 / 2015

Transaction ID : SA11AI.133002

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Chuck Reutter

Mailing Address 29066 Bradley Rd.

City

State

Zip Code

Menifee

CA

92586

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.133144

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Chuck Reutter

Mailing Address 29066 Bradley Rd.

City State Zip Code
 Menifee CA 92586

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11AI.133145

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Alan Robinson

Mailing Address 5040 Comache Drive apt 80

City State Zip Code
 La Mesa CA 91942

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 14 / 2015

Transaction ID : SA11AI.132637

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Frank Santos

Mailing Address PO Box 25683

City State Zip Code
 FRESNO CA 93729

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 16 / 2015

Transaction ID : SA11AI.133036

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 81
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Frank Santos

Mailing Address PO Box 25683

City	State	Zip Code
FRESNO	CA	93729

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06	/	17	/	2015

Transaction ID : SA11Al.133112

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Aleatha Scholer

Mailing Address 10408 Ridgecircle Dr NW

City	State	Zip Code
Albuquerque	NM	87114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06	/	29	/	2015

Transaction ID : SA11Al.132950

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Randolph Shannon

Mailing Address 600 13th Ave.

City	State	Zip Code
New Brighton	PA	15066

FEC ID number of contributing
federal political committee.

C

Name of Employer

PMET Inc.

Occupation

Laboratory Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1846.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06	/	10	/	2015

Transaction ID : SA11Al.132537

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Eve Shapiro

Mailing Address 5373 N. Via Alcalde

City State Zip Code
Tucson AZ 85718

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

06 / 22 / 2015

Transaction ID : SA11AI.132832

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Thomas Sheehan

Mailing Address 640 NW 74th St.

City State Zip Code
Seattle WA 98117

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 26 / 2015

Transaction ID : SA11AI.132906

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Linda Sleffel

Mailing Address 2407 McCauley Court

City State Zip Code
Columbus OH 43220

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 12 / 2015

Transaction ID : SA11AI.132596

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Donna Smith

Mailing Address 9123 E. Mississippi Ave., Apt. 13-

City State Zip Code
 Denver CO 80247

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 California Nurses Association Communications Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 10 / 2015

Transaction ID : SA11AI.132539

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. David Sonneborn

Mailing Address 1183 N. Navarro Pl

City State Zip Code
 Orange CA 92869

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 retired retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

06 / 15 / 2015

Transaction ID : SA11AI.132653

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

c. Lana Spight

Mailing Address 17621 Creek Ridge Pass

City State Zip Code
 Minnetonka MN 55345

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Retired Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.133189

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Laura Stokes

Mailing Address PO Box 218

City

Corrales

State

NM

Zip Code

87048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

06 / 26 / 2015

Transaction ID : SA11AI.132908

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Paul Stokes

Mailing Address PO Box 218

City

Tucson

State

AZ

Zip Code

12345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

06 / 26 / 2015

Transaction ID : SA11AI.132907

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. James Swanson

Mailing Address 2221 W Hubbard St

City

Chicago

State

IL

Zip Code

60612

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Design Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

06 / 16 / 2015

Transaction ID : SA11AI.132673

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Alice Swift

Mailing Address 36 Pondview Drive

City	State	Zip Code
Amherst	MA	01002

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06	/	08	/	2015

Transaction ID : SA11Al.132478

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Jennifer Tomkins

Mailing Address 27578 Hunters' Lane

City	State	Zip Code
Sycamore	IL	60178

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Interim Innkeeper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : SA11Al.132597

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Tom Walker

Mailing Address 100 Central Ave. #1013

City	State	Zip Code
Sarasota	FL	34236

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

None

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06	/	14	/	2015

Transaction ID : SA11Al.133293

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

575.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Richard Warner

Mailing Address 3100 Newport Ct

City

Arlington

State

TX

Zip Code

76015

FEC ID number of contributing
federal political committee.

C

Name of Employer

SDS

Occupation

SW Engineer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 10 / 2015

Transaction ID : SA11AI.132545

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Tracy Waters

Mailing Address 14207 NW Newberry Road

City

Portland

State

OR

Zip Code

97231

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Family Therapist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

06 / 21 / 2015

Transaction ID : SA11AI.133361

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Tracy Waters

Mailing Address 14207 NW Newberry Road

City

Portland

State

OR

Zip Code

97231

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Family Therapist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 28 / 2015

Transaction ID : SA11AI.132941

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. philip williams

Mailing Address 19 edith

City State Zip Code
san francisco CA 94133

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 08 / 2015

Transaction ID : SA11AI.132479

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Jan Wilson

Mailing Address 16035 26 Ave Ne

City State Zip Code
Shoreline WA 98155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 16 / 2015

Transaction ID : SA11AI.133078

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Charlene Woodcock

Mailing Address 2355 Virginia Street

City State Zip Code
Berkeley CA 94709-1315

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2015

Transaction ID : SA11AI.132318

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

1290.00

TOTAL This Period (last page this line number only)..... ►

10514.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. ACTBLUE Technical Services

Date of Disbursement

Transaction ID : SB21B.133363

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10.44
25-34	10.44
35-44	10.44
45-54	10.44
55-64	10.44
65-74	10.44
75-84	10.44
85+	40.44

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. ACTBLUE Technical Services

Mailing Address 14 Arrow St.

Date of Disbursement

MM / DD / YYYY

City	State	Zip Code
Cambridge	MA	02138

Transaction ID : SB21B.133419

Purpose of Disbursement
Service fee

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	~10.00
25-34	~10.00
35-44	~10.00
45-54	~10.00
55-64	~10.00
65-74	14.67
75-84	~10.00
85+	~10.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. American Airlines

Date of Disbursement

Mailing Address 4333 Amon Carter Blvd.

City	State	Zip Code
Fort Worth	TX	76155

Transaction ID : SB21B.133445

Purpose of Disbursement
Airfare

Amount of Each Disbursement this Period

360.20

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional).....

415.31

TOTAL This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Three digital displays are shown, each with a row of small squares above the main display area. The first display shows '06' with two squares (left and right). The second display shows '09' with two squares (left and right). The third display shows '2015' with four squares (all four positions).

7.95

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

MM / DD / YYYY

59.14

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

139.58

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

206.67

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. Authorize.net

Category/
Type

151.00

State: District:

B. Bank of America

06 / 02 / 2015

Category/
Type

713.28

State: District:

C. Bank of America

Category/
Type

Age Group	Number of People
0-14	1.00
15-24	1.00
25-34	2.00
35-44	1.00
45-54	1.00
55-64	1.00
65-74	1.00
75-84	2.00
85-94	1.00
95-104	1.00

State: District:

884.28

[illegible]

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

16.00

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

MM / DD / YYYY

Category	Percentage
Do not use a mobile phone	76.45

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

500.00

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

592.45

TOTAL This Period (last page this line number only).....

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.133470

Original vendor did not exceed an aggregate of \$200.00.

Form/Schedule: SB21B
Transaction ID: SB21B.133517

Original vendors did not exceed an aggregate of \$200.

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. Gebbie Press

Mailing Address PO Box 1000

City	State	Zip Code
New Paltz	NY	12561

Purpose of Disbursement	Web service
-------------------------	-------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.133479

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. Google Service Apps

Mailing Address 1600 Amphitheatre Way

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement	Email server
-------------------------	--------------

Candidate Name	Score
John Doe	85
Jane Smith	78
Michael Johnson	92
Sarah Williams	88
David Brown	75
Emily Davis	82
James Wilson	79
Alice Taylor	86
Robert Miller	77
Olivia Moore	83
William Clark	76
Isabella Lewis	81
Benjamin Hall	74
Mia King	87
Ethan Green	73
Ava Adams	84
Noah Baker	72
Charlotte Nelson	89
Liam Hill	71
Amelia Scott	80
Lucas Young	70
Harper Wright	86
Elijah Lopez	75
Evelyn King	83
Sebastian Green	74
Madison Adams	85
Isaac Baker	72
Chloe Nelson	88
Wyatt Hill	71
Abigail Scott	80
Grayson Young	70
Skylar Wright	86
Levi Lopez	75
Brooklyn King	83
Isaiah Green	74
Madeline Adams	85
Isaac Baker	72
Chloe Nelson	88
Wyatt Hill	71
Abigail Scott	80
Grayson Young	70
Skylar Wright	86
Levi Lopez	75
Brooklyn King	83
Isaiah Green	74
Madeline Adams	85
Isaac Baker	72
Chloe Nelson	88
Wyatt Hill	71
Abigail Scott	80
Grayson Young	70
Skylar Wright	86
Levi Lopez	75
Brooklyn King	83
Isaiah Green	74
Madeline Adams	85
Isaac Baker	72
Chloe Nelson	88
Wyatt Hill	71
Abigail Scott	80
Grayson Young	70
Skylar Wright	86
Levi Lopez	75
Brooklyn King	83
Isaiah Green	74
Madeline Adams	85
Isaac Baker	72
Chloe Nelson	88
Wyatt Hill	71
Abigail Scott	80
Grayson Young	70
Skylar Wright	86
Levi Lopez	75
Brooklyn King	83
Isaiah Green	74
Madeline Adams	85
Isaac Baker	72
Chloe Nelson	88
Wyatt Hill	71
Abigail Scott	80
Grayson Young	70
Skylar Wright	86
Levi Lopez	75
Brooklyn King	83
Isaiah Green	74
Madeline Adams	85
Isaac Baker	72
Chloe Nelson	88
Wyatt Hill	71
Abigail Scott	80
Grayson Young	70
Skylar Wright	86
Levi Lopez	75
Brooklyn King	83
Isaiah Green	74
Madeline Adams	85
Isaac Baker	72
Chloe Nelson	88
Wyatt Hill	71
Abigail Scott	80
Grayson Young	70
Skylar Wright	86
Levi Lopez	75
Brooklyn King	83
Isaiah Green	74
Madeline Adams	85
Isaac Baker	72
Chloe Nelson	88
Wyatt Hill	71
Abigail Scott	80
Grayson Young	70
Skylar Wright	86
Levi Lopez	75
Brooklyn King	83
Isaiah Green	74
Madeline Adams	85
Isaac Baker	72
Chloe Nelson	88
Wyatt Hill	71
Abigail Scott	80
Grayson Young	70
Skylar Wright	86
Levi Lopez	75
Brooklyn King	83
Isaiah Green	74
Madeline Adams	85
Isaac Baker	72
Chloe Nelson	88
Wyatt Hill	71
Abigail Scott	80
Grayson Young	70
Skylar Wright	86
Levi Lopez	75
Brooklyn King	83
Isaiah Green	74
Madeline Adams	85
Isaac Baker	72
Chloe Nelson	88
Wyatt Hill	71
Abigail Scott	80
Grayson Young	70
Skylar Wright	86
Levi Lopez	75
Brooklyn King	83
Isaiah Green	74
Madeline Adams	85
Isaac Baker	72
Chloe Nelson	88
Wyatt Hill	71
Abigail Scott	80
Grayson Young	70
Skylar Wright	86
Levi Lopez	75
Brooklyn King	83
Isaiah Green	74
Madeline Adams	85
Isaac Baker	72
Chloe Nelson	88
Wyatt Hill	71
Abigail Scott	80
Grayson Young	70
Skylar Wright	86
Levi Lopez	75
Brooklyn King	83
Isaiah Green	74
Madeline Adams	85
Isaac Baker	72
Chloe Nelson	88
Wyatt Hill	7

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.133483

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10.5
25-34	15.5
35-44	20.5
45-54	25.5
55-64	30.5
65-74	35.5
75-84	40.5
85+	70.55

Full Name (Last, First, Middle Initial)

C. Russell Greene

Mailing Address 5011 Noeline Ave.

City	State	Zip Code
Encino	CA	91436

Purpose of Disbursement	Reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.133514

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1870.55

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.133514

Original vendor was Green Plate Catering, 11307 Elkin St., Wheaton MD 20902 for \$1,500.00 on 5/8/15 for catering.

Form/Schedule:
Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 81

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Full Name (Last, First, Middle Initial)

A. Russell Greene

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	7			2	0	1	5		

Mailing Address 5011 Noeline Ave.

City	State	Zip Code
Encino	CA	91436

Transaction ID : SB21B.133515Purpose of Disbursement
Reimbursement

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

1636.80

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Full Name (Last, First, Middle Initial)

B. Janis Kay

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	5		

Mailing Address 1902 N. Meyers Rd.

City	State	Zip Code
Liberty Lake	WA	99016

Transaction ID : SB21B.133485Purpose of Disbursement
June Salary

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

275.00

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Full Name (Last, First, Middle Initial)

C. Maiahost.com

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	9			2	0	1	5		

Mailing Address 37-28 61st St.

City	State	Zip Code
Woodside	NY	11377

Transaction ID : SB21B.133499Purpose of Disbursement
Web hosting

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

113.85

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2025.65

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.133515

Original vendors include Gandhi Palace, 515 W. Katella Ave., Anaheim, CA 92802 for \$1,313.15 on 5/16/15 for catering; Bevmo, 5820 Sepulveda Blvd., Van Nuys, CA 91411 for \$164.66 on 5/17/15 for wine; Cheesecake Factory, 15301 Ventura Blvd., Sherman Oaks, CA 91403 for \$48.95 on 5/17/15 for dessert; Whole Foods, 4520 N. Sepulveda Blvd., Sherman Oaks, CA 91403 for \$28.16 on 5/17/15 for supplies and FedEx, 15720 Ventura Blvd., Encino, CA 91436 for \$81.88 on 5/15/15 for flyers. This was for a PDA fundraiser in CA not associated with any candidate.

Form/Schedule:
Transaction ID:

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. Newton Media Group

Date of Disbursement

Mailing Address c/o Alex Lawson
1954 Columbia Rd. NW

City	State	Zip Code
Washington	DC	20009

Transaction ID : SB21B.133512

Purpose of Disbursement
Web cast

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B. Deb Schrishuhn

Date of Disbursement

Mailing Address 2415 E. Nevada St.

City	State	Zip Code
Urbana	IL	61802

Transaction ID : SB21B.133471

Purpose of Disbursement
Salary Bonus

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

C. Deb Schrishuhn

Date of Disbursement

Mailing Address 2415 E. Nevada St.

City	State	Zip Code
Urbana	IL	61802

Transaction ID : SB21B.133472

Purpose of Disbursement
June Salary

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

SUBTOTAL of Disbursements This Page (optional).....

900.00

TOTAL This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA



Age Group	Percentage
18-24	10%
25-34	15%
35-44	20%
45-54	25%
55-64	30%
65-74	35%
75-84	40%
85+	45%

06 / 24 / 2015

223.92

State: District:

324.92

7447.63

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 47 OF 81
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / MM / YYYYYY				
Full Name of Payee Steve Cobble			Date of Public Distribution/Dissemination MM / MM / YYYYYY 06 / 17 / 2015	
Mailing Address 609 Irving St. NW			Amount 476.98	
City Washington	State DC	Zip Code 20010	Transaction ID : SE.133564	
Purpose of Expenditure Travel reimbursement		Category/ Type 002	Date of Disbursement or Obligation MM / MM / YYYYYY 06 / 17 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		7734.03	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Collective Copy			Date of Public Distribution/Dissemination MM / MM / YYYYYY 06 / 17 / 2015	
Mailing Address 93 Main St.			Amount 223.00	
City Florence	State MA	Zip Code 01062	Transaction ID : SE.133462	
Purpose of Expenditure Flyers		Category/ Type 006	Date of Disbursement or Obligation MM / MM / YYYYYY 06 / 17 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		6767.42	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			699.98	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶				
(c) TOTAL Independent Expenditures..... ▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>		[Electronically Filed]		Date MM / MM / YYYYYY 08 / 21 / 2015

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SE

Transaction ID : SE.133564

Original vendors include Hotel Burlington, 60 Battery St., Burlington, VT 05401 for \$330.78 on 5/25/2015 for hotel and \$24.00 on 5/25/2015 for parking. Remaining vendors did not exceed an aggregate of \$200.00. This was for Steve to attend the kickoff event for Bernie Sanders' campaign.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 49 OF 81
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY				
Full Name of Payee Dem Store			Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 15 / 2015	
Mailing Address 5104 Macarthur Blvd. NW			Amount 4155.36	
City Washington		State DC	Zip Code 20016	
Purpose of Expenditure Stickers and buttons		Category/Type 006	Transaction ID : SE.133474 Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 15 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 6366.13		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Minuteman Press			Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 01 / 2015	
Mailing Address 905 S. Neil St. Ste. B			Amount 999.00	
City Champaign		State IL	Zip Code 61820	
Purpose of Expenditure Flyers		Category/Type 006	Transaction ID : SE.133503 Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 01 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 999.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			5154.36	
(b) SUBTOTAL of Unitemized Independent Expenditures▶				
(c) TOTAL Independent Expenditures.....▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>		[Electronically Filed]		Date MM / DD / YYYYYY 08 / 21 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 50 OF 81
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA		FEC IDENTIFICATION NUMBER ▼ C C00402800
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Minuteman Press		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 01 / 2015	
Mailing Address 905 S. Neil St. Ste. B		Amount 370.72	
City Champaign	State IL	Zip Code 61820	Transaction ID : SE.133504
Purpose of Expenditure Flyers	Category/Type 006	Date of Disbursement or Obligation MM / DD / YYYY 06 / 01 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 1369.72		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Minuteman Press		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 08 / 2015	
Mailing Address 905 S. Neil St. Ste. B		Amount 85.00	
City Champaign	State IL	Zip Code 61820	Transaction ID : SE.133506
Purpose of Expenditure Flyers	Category/Type 006	Date of Disbursement or Obligation MM / DD / YYYY 06 / 08 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 1544.63		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	455.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kimberly Buchan

[Electronically Filed]

Signature

Date

MM / DD / YYYY
08 / 21 / 2015

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / MM / YYYY				
Full Name of Payee Minuteman Press			Date of Public Distribution/Dissemination MM / MM / YYYY 06 / 10 / 2015	
Mailing Address 905 S. Neil St. Ste. B			Amount 300.00	
City Champaign	State IL	Zip Code 61820	Transaction ID : SE.133508	
Purpose of Expenditure Flyers		Category/Type 006	Date of Disbursement or Obligation MM / MM / YYYY 06 / 10 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 1946.98		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Minuteman Press			Date of Public Distribution/Dissemination MM / MM / YYYY 06 / 11 / 2015	
Mailing Address 905 S. Neil St. Ste. B			Amount 166.78	
City Champaign	State IL	Zip Code 61820	Transaction ID : SE.133509	
Purpose of Expenditure Flyers		Category/Type 006	Date of Disbursement or Obligation MM / MM / YYYY 06 / 11 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 2141.97		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			466.78	
(b) SUBTOTAL of Unitemized Independent Expenditures▶				
(c) TOTAL Independent Expenditures.....▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>		Date MM / MM / YYYY 08 / 21 / 2015		
			[Electronically Filed]	

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NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / MM / YYYYYY				
Full Name of Payee Minuteman Press			Date of Public Distribution/Dissemination MM / MM / YYYYYY 06 / 19 / 2015	
Mailing Address 905 S. Neil St. Ste. B			Amount 90.59	
City Champaign	State IL	Zip Code 61820	Transaction ID : SE.133510	
Purpose of Expenditure Flyers		Category/Type 006	Date of Disbursement or Obligation MM / MM / YYYYYY 06 / 19 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 7900.13		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Minuteman Press			Date of Public Distribution/Dissemination MM / MM / YYYYYY 06 / 29 / 2015	
Mailing Address 905 S. Neil St. Ste. B			Amount 176.71	
City Champaign	State IL	Zip Code 61820	Transaction ID : SE.133511	
Purpose of Expenditure Flyers		Category/Type 006	Date of Disbursement or Obligation MM / MM / YYYYYY 06 / 29 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 8322.93		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			267.30	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶				
(c) TOTAL Independent Expenditures..... ▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>		[Electronically Filed]		Date MM / MM / YYYYYY 08 / 21 / 2015

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NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY				
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 01 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 12.65	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133521	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 01 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		1382.37	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 02 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 21.40	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133522	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 02 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		1403.77	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			34.05	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶				
(c) TOTAL Independent Expenditures..... ▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>		[Electronically Filed]		Date MM / DD / YYYYYY 08 / 21 / 2015

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NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / MM / YYYYYY				
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / MM / YYYYYY 06 / 05 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 50.81	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133523	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / MM / YYYYYY 06 / 05 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		1454.58	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / MM / YYYYYY 06 / 05 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 5.05	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133524	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / MM / YYYYYY 06 / 05 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		1459.63	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			55.86	
(b) SUBTOTAL of Unitemized Independent Expenditures▶				
(c) TOTAL Independent Expenditures.....▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>		[Electronically Filed]		Date MM / MM / YYYYYY 08 / 21 / 2015

Full Name of Payee USPS		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 08 / 2015	
Mailing Address 1765 3 Mile Rd. NE		Amount 5.05	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133526
Purpose of Expenditure Postage	Category/ Type	001	Date of Disbursement or Obligation MM / DD / YYYY 06 / 08 / 2015
Name of Federal Candidate BERNARD SANDERS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought:	<input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:
Calendar Year-To-Date Per Election for Office Sought	1587.08		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	42.45
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kimberly Buchan

[Electronically Filed]

Date _____

Signature

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NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / MM / YYYY				
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / MM / YYYY 06 / 09 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 37.75	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133528	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / MM / YYYY 06 / 09 / 2015	
Name of Federal Candidate BERNARD SANDERS			Office Sought: <input checked="" type="checkbox"/> House District: 00 <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 1624.83			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / MM / YYYY 06 / 09 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 22.15	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133530	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / MM / YYYY 06 / 09 / 2015	
Name of Federal Candidate BERNARD SANDERS			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 1646.98			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			59.90	
(b) SUBTOTAL of Unitemized Independent Expenditures▶				
(c) TOTAL Independent Expenditures.....▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>			Date MM / MM / YYYY 08 / 21 / 2015	
[Electronically Filed]				

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NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY				
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 10 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 10.10	
City Grand Rapids State MI Zip Code 49505		Transaction ID : SE.133531		
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 10 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 1957.08		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 10 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 18.11	
City Grand Rapids State MI Zip Code 49505		Transaction ID : SE.133532		
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 10 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 1975.19		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			28.21	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶				
(c) TOTAL Independent Expenditures..... ▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Kimberly Buchan</u>		[Electronically Filed]		Date MM / DD / YYYYYY 08 / 21 / 2015

Full Name of Payee USPS		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>06 / 11 / 2015</div> </div>	
Mailing Address 1765 3 Mile Rd. NE		Amount <div> <div></div> <div>68.80</div> </div>	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133533 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>06 / 11 / 2015</div> </div>
Purpose of Expenditure Postage		Category/ Type <div> <div></div> <div>001</div> </div>	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President District: <u>00</u> State: _____
Calendar Year-To-Date Per Election for Office Sought <div> <div></div> <div>2210.77</div> </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee USPS		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>06 / 15 / 2015</div> </div>	
Mailing Address 1765 3 Mile Rd. NE		Amount <div> <div>Amount</div> <div>19.21</div> </div>	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133534 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>06 / 15 / 2015</div> </div>
Purpose of Expenditure Postage		Category/ Type 001	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: 00 State:
Calendar Year-To-Date Per Election for Office Sought		<div> <div>Amount</div> <div>6385.34</div> </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	88.01
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date _____

Signature

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NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / MM / YYYYYY				
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / MM / YYYYYY 06 / 15 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 15.75	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133535	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / MM / YYYYYY 06 / 15 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		6401.09	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / MM / YYYYYY 06 / 16 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 77.15	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133536	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / MM / YYYYYY 06 / 16 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		6478.24	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			92.90	
(b) SUBTOTAL of Unitemized Independent Expenditures▶				
(c) TOTAL Independent Expenditures.....▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>		[Electronically Filed]		Date MM / MM / YYYYYY 08 / 21 / 2015

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NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00402800</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px;">MM / DD / YYYY</div>				
Full Name of Payee USPS			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> 06 / 16 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">66.18</div>	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133537 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> 06 / 16 / 2015	
Purpose of Expenditure Postage		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>		
Name of Federal Candidate BERNARD SANDERS			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">6544.42</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee USPS			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> 06 / 17 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">30.30</div>	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133538 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> 06 / 17 / 2015	
Purpose of Expenditure Postage		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>		
Name of Federal Candidate BERNARD SANDERS			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">6797.72</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px;">96.48</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px;"></div>	
(c) TOTAL Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> 08 / 21 / 2015	
[Electronically Filed]				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 61 OF 81
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00402800</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>				
Full Name of Payee USPS			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 06 / 17 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 9.13	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133540 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 06 / 17 / 2015	
Purpose of Expenditure Postage		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		
Name of Federal Candidate BERNARD SANDERS			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 6806.85			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee USPS			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 06 / 17 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 9.75	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133541 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 06 / 17 / 2015	
Purpose of Expenditure Postage		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		
Name of Federal Candidate BERNARD SANDERS			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 6816.60			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 18.88	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
(c) TOTAL Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 08 / 21 / 2015	
[Electronically Filed]				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA		FEC IDENTIFICATION NUMBER ▼ C C00402800
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee USPS		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 17 / 2015	
Mailing Address 1765 3 Mile Rd. NE		Amount 10.75	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133542
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 06 / 17 / 2015
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 6827.35		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee USPS		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 18 / 2015	
Mailing Address 1765 3 Mile Rd. NE		Amount 75.51	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133543
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 06 / 18 / 2015
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 7809.54		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	86.26
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kimberly Buchan
Signature

[Electronically Filed]

Date **08 / 21 / 2015**

SCHEDULE E (FEC Form 3X)
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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / MM / YYYYYY				
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / MM / YYYYYY 06 / 19 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 15.55	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133544	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / MM / YYYYYY 06 / 19 / 2015	
Name of Federal Candidate BERNARD SANDERS			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 7915.68			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / MM / YYYYYY 06 / 22 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 22.70	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133545	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / MM / YYYYYY 06 / 22 / 2015	
Name of Federal Candidate BERNARD SANDERS			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 7938.38			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			38.25	
(b) SUBTOTAL of Unitemized Independent Expenditures▶				
(c) TOTAL Independent Expenditures.....▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>			Date MM / MM / YYYYYY 08 / 21 / 2015	
[Electronically Filed]				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 64 OF 81
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY				
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 23 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 45.45	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133550	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 06 / 23 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 7983.83		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 23 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 15.15	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133551	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 06 / 23 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 7998.98		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			60.60	
(b) SUBTOTAL of Unitemized Independent Expenditures▶				
(c) TOTAL Independent Expenditures.....▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>		[Electronically Filed]		Date MM / DD / YYYY 08 / 21 / 2015

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 65 OF 81
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NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / MM / YYYYYY				
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 23 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 10.55	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133552	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 23 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 8009.53		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 23 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 18.11	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133553	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 23 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 8027.64		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			28.66	
(b) SUBTOTAL of Unitemized Independent Expenditures▶				
(c) TOTAL Independent Expenditures.....▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>		[Electronically Filed]		Date MM / DD / YYYYYY 08 / 21 / 2015

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 66 OF 81
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY				
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 24 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 18.11	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133554	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 06 / 24 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 8045.75		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 25 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 58.37	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133555	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 06 / 25 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 8104.12		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			76.48	
(b) SUBTOTAL of Unitemized Independent Expenditures▶				
(c) TOTAL Independent Expenditures.....▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>		Date MM / DD / YYYY 08 / 21 / 2015		
			[Electronically Filed]	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 67 OF 81
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / MM / YYYYYY				
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 26 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 42.10	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133556	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 26 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 8146.22		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 29 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 15.35	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133557	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 29 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 8338.28		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			57.45	
(b) SUBTOTAL of Unitemized Independent Expenditures▶				
(c) TOTAL Independent Expenditures.....▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>		[Electronically Filed]		Date MM / DD / YYYYYY 08 / 21 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 68 OF 81
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY				
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 29 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 33.55	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133558	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 06 / 29 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		8371.83	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 30 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 135.46	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133574	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 06 / 30 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		8507.29	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			169.01	
(b) SUBTOTAL of Unitemized Independent Expenditures▶				
(c) TOTAL Independent Expenditures.....▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>		[Electronically Filed]		Date MM / DD / YYYY 08 / 21 / 2015

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY				
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 30 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 38.80	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133575	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 30 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		8546.09	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee USPS			Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 30 / 2015	
Mailing Address 1765 3 Mile Rd. NE			Amount 5.70	
City Grand Rapids	State MI	Zip Code 49505	Transaction ID : SE.133576	
Purpose of Expenditure Postage		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 30 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		8551.79	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			44.50	
(b) SUBTOTAL of Unitemized Independent Expenditures▶				
(c) TOTAL Independent Expenditures.....▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>		[Electronically Filed]		Date MM / DD / YYYYYY 08 / 21 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 70 OF 81
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00402800	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Woodland Hills Printing			Date of Public Distribution/Dissemination 06 / 17 / 2015	
Mailing Address 21602 Ventura Blvd.			Amount 429.70	
City Woodland Hills		State CA	Zip Code 91364	
Purpose of Expenditure Banners		Category/Type 006	Transaction ID : SE.133561 Date of Disbursement or Obligation 06 / 17 / 2015	
Name of Federal Candidate BERNARD SANDERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 7257.05		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee			Date of Public Distribution/Dissemination / / 	
Mailing Address			Amount 	
City		State	Zip Code	
Purpose of Expenditure		Category/Type 	Date of Disbursement or Obligation / / 	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			429.70	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			 	
(c) TOTAL Independent Expenditures..... ▶			8551.79	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Kimberly Buchan</i>		[Electronically Filed]		Date 08 / 21 / 2015

SCHEDULE H1 (FEC Form 3X)**METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)** (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Transaction ID : H1.133565

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☒ **or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal %

This ratio applies to (check all that apply):

Administrative ☒ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H3 (FEC Form 3X) **TRANSFERS FROM NONFEDERAL ACCOUNTS FOR** **ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 72 OF 81

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

NAME OF ACCOUNT

Progressive Vote NF DBA Progressive Democrats
 of America NF

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y
 06 / 02 / 2015

TOTAL AMOUNT TRANSFERRED

5000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

5000.00

Transaction ID : H3.133441

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred).....

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 73 OF 81

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

NAME OF ACCOUNT

Progressive Vote NF DBA Progressive Democrats
of America NF

DATE OF RECEIPT

MM / DD / YYYY
06 / 30 / 2015

TOTAL AMOUNT TRANSFERRED

5000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

5000.00

Transaction ID : H3.133442

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

10000.00

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred).....

10000.00

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 74 OF 81

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. Full Name (Last, First, Middle Initial) conor boylan			Transaction ID : H4.133466			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1502 W Sunnyside Ave						Allocated Activity or Event Year-To-Date 53000.00		
City CHICAGO	State IL	Zip Code 60640				Date 06 / 01 / 2015		
Purpose of Disbursement: May Salary								
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
1000.00				1000.00			2000.00	

B. Full Name (Last, First, Middle Initial) Janis Kay			Transaction ID : H4.133486			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1902 N. Meyers Rd.						Allocated Activity or Event Year-To-Date 53275.00		
City Liberty Lake	State WA	Zip Code 99016				Date 06 / 01 / 2015		
Purpose of Disbursement: May Salary								
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
137.50				137.50			275.00	

C. Full Name (Last, First, Middle Initial) Kimberly Buchan			Transaction ID : H4.133492			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3037 Crisfield Dr. NE						Allocated Activity or Event Year-To-Date 54850.00		
City Grand Rapids	State MI	Zip Code 49525				Date 06 / 01 / 2015		
Purpose of Disbursement: May Salary								
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
787.50				787.50			1575.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1925.00		1925.00		3850.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 75 OF 81

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. Full Name (Last, First, Middle Initial) conor boylan			Transaction ID : H4.133467			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1502 W Sunnyside Ave								
City CHICAGO		State IL		Zip Code 60640				
Purpose of Disbursement: June Salary				<div></div> Category/ Type		Allocated Activity or Event Year-To-Date <div></div> 56850.00		
Activity or Event Identifier: Administrative						Date <div>M M / D D / Y Y Y Y Y Y</div> <div>06 / 13 / 2015</div>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<div></div> 1000.00				<div></div> 1000.00				<div></div> 2000.00

B. Full Name (Last, First, Middle Initial) Christopher Miller			Transaction ID : H4.133464			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11606 Landview Ln.								
City Spotsylvania		State VA		Zip Code 22551				
Purpose of Disbursement: June Salary				<div></div> Category/ Type		Allocated Activity or Event Year-To-Date <div></div> 57000.00		
Activity or Event Identifier: Administrative						Date <div>M M / D D / Y Y Y Y Y Y</div> <div>06 / 15 / 2015</div>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<div></div> 75.00				<div></div> 75.00				<div></div> 150.00

C. Full Name (Last, First, Middle Initial) Deb Schrishuhn			Transaction ID : H4.133469			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2415 E. Nevada St.								
City Urbana		State IL		Zip Code 61802				
Purpose of Disbursement: June Salary				<div></div> Category/ Type		Allocated Activity or Event Year-To-Date <div></div> 57250.00		
Activity or Event Identifier: Administrative						Date <div>M M / D D / Y Y Y Y Y Y</div> <div>06 / 15 / 2015</div>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<div></div> 125.00				<div></div> 125.00				<div></div> 250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div></div> 1200.00		<div></div> 1200.00		<div></div> 2400.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<div></div>		<div></div>		<div></div>

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. Full Name (Last, First, Middle Initial) Donna Smith			Transaction ID : H4.133475			Allocated Activity or Event:		
Mailing Address 4502 N. Diamond Leaf Dr.						<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt		
City Castle Rock State CO Zip Code 80109						<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support		
Purpose of Disbursement: June Salary						<input type="checkbox"/> Public Comm (ref to party only) by PAC		
Activity or Event Identifier: Administrative						Allocated Activity or Event Year-To-Date 57325.00		
Category/Type						Date 06 / 15 / 2015		
FEDERAL SHARE			+			NONFEDERAL SHARE		
37.50						=		
			37.50			TOTAL AMOUNT		
						75.00		

B. Full Name (Last, First, Middle Initial) Jeanne Dauray			Transaction ID : H4.133488			Allocated Activity or Event:		
Mailing Address 569 W. Seaton Dr.						<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt		
City Round Lake State IL Zip Code 60073						<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support		
Purpose of Disbursement: June Salary						<input type="checkbox"/> Public Comm (ref to party only) by PAC		
Activity or Event Identifier: Administrative						Allocated Activity or Event Year-To-Date 57700.00		
Category/Type						Date 06 / 15 / 2015		
FEDERAL SHARE			+			NONFEDERAL SHARE		
187.50						=		
			187.50			TOTAL AMOUNT		
						375.00		

C. Full Name (Last, First, Middle Initial) Judith Hess			Transaction ID : H4.133490			Allocated Activity or Event:		
Mailing Address 1012 E. Manhattan Ave.						<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt		
City Fresno State CA Zip Code 93720						<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support		
Purpose of Disbursement: June Salary						<input type="checkbox"/> Public Comm (ref to party only) by PAC		
Activity or Event Identifier: Administrative						Allocated Activity or Event Year-To-Date 58200.00		
Category/Type						Date 06 / 15 / 2015		
FEDERAL SHARE			+			NONFEDERAL SHARE		
250.00						=		
			250.00			TOTAL AMOUNT		
						500.00		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
475.00		475.00		950.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. Full Name (Last, First, Middle Initial) Michael D. Fox		Transaction ID : H4.133495		Allocated Activity or Event:	
Mailing Address 719 52nd St. N				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City St. Petersburg		State FL	Zip Code 33710	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: June Salary				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date	
				59200.00	
Date		06 / 15 / 2015			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
500.00			500.00		1000.00

B. Full Name (Last, First, Middle Initial) Mike Hersh		Transaction ID : H4.133497		Allocated Activity or Event:	
Mailing Address 12008 Milton St.				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Wheaton		State MD	Zip Code 20902	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: June Salary				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date	
				59775.00	
Date		06 / 15 / 2015			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
287.50			287.50		575.00

C. Full Name (Last, First, Middle Initial) Steve Cobble		Transaction ID : H4.133519		Allocated Activity or Event:	
Mailing Address 609 Irving St. NW				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Washington		State DC	Zip Code 20010	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: June Salary				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date	
				60275.00	
Date		06 / 15 / 2015			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
250.00			250.00		500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1037.50		1037.50		2075.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 78 OF 81

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. Full Name (Last, First, Middle Initial) Janis Kay			Transaction ID : H4.133487			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1902 N. Meyers Rd.								
City Liberty Lake	State WA	Zip Code 99016				Allocated Activity or Event Year-To-Date 60550.00		
Purpose of Disbursement: June Salary						Date MM / DD / YYYY 06 / 16 / 2015		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
137.50						=		
			137.50			TOTAL AMOUNT		
						275.00		

B. Full Name (Last, First, Middle Initial) Kimberly Buchan			Transaction ID : H4.133493			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3037 Crisfield Dr. NE								
City Grand Rapids	State MI	Zip Code 49525				Allocated Activity or Event Year-To-Date 62125.00		
Purpose of Disbursement: June Salary						Date MM / DD / YYYY 06 / 16 / 2015		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
787.50						=		
			787.50			TOTAL AMOUNT		
						1575.00		

C. Full Name (Last, First, Middle Initial) Salsa Labs, Inc.			Transaction ID : H4.133518			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 674533								
City Detroit	State MI	Zip Code 48267				Allocated Activity or Event Year-To-Date 64325.00		
Purpose of Disbursement: Membership Databank Service						Date MM / DD / YYYY 06 / 22 / 2015		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
1100.00						=		
			1100.00			TOTAL AMOUNT		
						2200.00		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2025.00		2025.00		4050.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. Full Name (Last, First, Middle Initial) conor boylan		Transaction ID : H4.133468		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1502 W Sunnyside Ave					
City CHICAGO	State IL	Zip Code 60640			
Purpose of Disbursement: June Salary				Allocated Activity or Event Year-To-Date 66325.00	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1000.00			1000.00		2000.00

B. Full Name (Last, First, Middle Initial) Christopher Miller		Transaction ID : H4.133465		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 11606 Landview Ln.					
City Spotsylvania	State VA	Zip Code 22551			
Purpose of Disbursement: June Salary				Allocated Activity or Event Year-To-Date 66475.00	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00			75.00		150.00

C. Full Name (Last, First, Middle Initial) Jeanne Dauray		Transaction ID : H4.133489		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 569 W. Seaton Dr.					
City Round Lake	State IL	Zip Code 60073			
Purpose of Disbursement: June Salary				Allocated Activity or Event Year-To-Date 66850.00	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
187.50			187.50		375.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1262.50		1262.50		2525.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. Full Name (Last, First, Middle Initial) Judith Hess			Transaction ID : H4.133491			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1012 E. Manhattan Ave.								
City Fresno		State CA		Zip Code 93720				
Purpose of Disbursement: June Salary				Category/ Type		Allocated Activity or Event Year-To-Date 67350.00		
Activity or Event Identifier: Administrative						Date <input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
250.00						=		
			250.00			TOTAL AMOUNT		
						500.00		

B. Full Name (Last, First, Middle Initial) Kimberly Buchan			Transaction ID : H4.133494			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3037 Crisfield Dr. NE								
City Grand Rapids		State MI		Zip Code 49525				
Purpose of Disbursement: June Salary				Category/ Type		Allocated Activity or Event Year-To-Date 68925.00		
Activity or Event Identifier: Administrative						Date <input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
787.50						=		
			787.50			TOTAL AMOUNT		
						1575.00		

C. Full Name (Last, First, Middle Initial) Michael D. Fox			Transaction ID : H4.133496			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 719 52nd St. N								
City St. Petersburg		State FL		Zip Code 33710				
Purpose of Disbursement: June Salary				Category/ Type		Allocated Activity or Event Year-To-Date 69925.00		
Activity or Event Identifier: Administrative						Date <input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
500.00						=		
			500.00			TOTAL AMOUNT		
						1000.00		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1537.50		1537.50		3075.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A. Full Name (Last, First, Middle Initial) Mike Hersh			Transaction ID : H4.133498			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 12008 Milton St.								
City Wheaton		State MD		Zip Code 20902				
Purpose of Disbursement: June Salary				<div></div> Category/ Type		Allocated Activity or Event Year-To-Date <div></div> 70500.00		
Activity or Event Identifier: Administrative						Date <div>MM / DD / YYYY</div> 06 / 30 / 2015		
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div></div> 287.50						<div></div> 287.50		
			=			TOTAL AMOUNT		
						<div></div> 575.00		

B. Full Name (Last, First, Middle Initial) Steve Cobble			Transaction ID : H4.133520			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 609 Irving St. NW								
City Washington		State DC		Zip Code 20010				
Purpose of Disbursement: June Salary				<div></div> Category/ Type		Allocated Activity or Event Year-To-Date <div></div> 71000.00		
Activity or Event Identifier: Administrative						Date <div>MM / DD / YYYY</div> 06 / 30 / 2015		
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div></div> 250.00						<div></div> 250.00		
			=			TOTAL AMOUNT		
						<div></div> 500.00		

C. Full Name (Last, First, Middle Initial)						Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address								
City		State		Zip Code				
Purpose of Disbursement:				<div></div> Category/ Type		Allocated Activity or Event Year-To-Date <div></div>		
Activity or Event Identifier:						Date <div>MM / DD / YYYY</div>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div></div>						<div></div>		
			=			TOTAL AMOUNT		
<div></div>						<div></div>		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div></div> 537.50		<div></div> 537.50		<div></div> 1075.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<div></div> 10000.00		<div></div> 10000.00		<div></div> 20000.00